

EXHIBIT E

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

Funded Projects

Decreasing Community Toddler Formula Use

Project Year

2022

City & State

New York, New York

Program Name

CATCH Resident

Topic

Nutrition

Program Description

The Problem: Many families give their children toddler formula instead of the AAP recommended cow's milk at ages 12-36 months. This is despite established poor nutritional outcomes and increased associated costs with toddler formula, largely due to false and misleading advertising. The AAP describes the use of toddler formula as "unnecessary and potentially harmful to young children" (1). Compared to whole milk, 80% of toddler milks have higher sugar content and 100% have less protein. Of toddler formulas, 85-90% contain corn syrup, sucrose, sugar, cane juice, or vegetable oil (2). Despite this, a study published in Public Health Nutrition found that with the promotion of breastfeeding over infant formula, formula manufacturers have invested more advertising dollars in toddler formula. Toddler formula

sales more than doubled in their study period, while advertising spending for toddler formula increased from about \$5 million annually to more than \$20 million (3). A 2020 study published in Maternal & Child Nutrition concluded that, for U.S. caregivers of toddlers, most believed unsubstantiated marketing claims surrounding benefits of toddler milk. Regulation of toddler labels and public health campaigns to counter marketing claims are required (4). Nido by Nestle is common in our local community and is marketed toward low-income consumers in developing economies. Primary Setting Our community includes families who live in Northern Manhattan, the Bronx, and/or families who utilize NewYork-Presbyterian Ambulatory Care Network (ACN) community-based hospital affiliated practices. It is primarily an urban, low income, immigrant Latinx community. Number of Children Affected Though there is no data on toddler formula use in our community specifically, a study of a low-income Latinx population in Baltimore, MD, similar to our own, demonstrated 97% of participants were familiar with Nido, 44% gave Nido to their child, and 30% believed it was healthier than whole milk (5). According to the 2018 NYC Health Community Health Profile, 25% of Washington Heights and Inwood children in grades K through 8 have obesity. This is higher than the citywide rate of one in five (6). Project Goal To understand caregiver motivation behind toddler formula use and to build easily accessible and sustainable sources of accurate information surrounding toddler formula for parents in our communities of Northern Manhattan and the Bronx, in an effort to decrease parental use of toddler formula in their children ages 12-36 months by 20%. Proposed Intervention We first will collect data on toddler use in our community, and then work with local organizations to combat misinformation surrounding toddler formula amongst parents. We will conduct a baseline survey of 65 families with children ages 12-36 months to estimate toddler formula use in our community, and to understand the primary motivators behind toddler formula use. Using this information, we will then educate pediatric primary care providers across NewYork Presbyterian ACN about the detriments of toddler formula, and ways to combat information surrounding it. Data collection and provider education will set the stage for our work in the community, the most important part of our intervention. For families, we will design and implement a non-prescriptive, educational workshop on the detriments of toddler formula in collaboration with local partners, and conduct them through existing channels for parent education at our partner early childhood facing community-based organizations. Finally, we will train members within our partner organizations to incorporate this workshop into their already established curricula for parents for sustainability. Anticipated Outcomes By June 1, 2023, we hope to decrease parental use of toddler formula among children ages 12-36 months in our community by 20%,

measured through pre- and post-workshop surveys, and sustainably integrate our workshop into the curricula of our community partner organizations.

Project Goal

To understand caregiver motivation behind toddler formula use and to build easily accessible and sustainable sources of accurate information surrounding toddler formula for parents in our communities of Washington Heights and the Bronx, in an effort to decrease parental use of toddler formula in their children ages 12-36 months by 20%.

Project Objective 1

Content Creation and Collection: By July 1, co-create and complete a randomized baseline survey of 65 families with children ages 12-36 months to estimate prevalence of toddler formula use and identify caregiver motivations and practices surrounding toddler formula use and food access. The survey will be co-created with 2-3 parents in the community.

Project Objective 2

Content Dissemination to Local Providers: By October 31, educate primary care preceptors (approximately 25) and residents (78) across all 4 NewYork-Presbyterian Ambulatory Care Network pediatric clinic sites about the detriments of families feeding their 12-36 month old children toddler formula instead of whole cow's milk, and by that date, also develop and push out electronic medical record (EMR) dot phrases to be utilized in anticipatory guidance and incorporated in the Epic After Visit Summary for 12-36 month well child visits across all 4 sites

Project Objective 3

Content Dissemination to the Community and Sustainability: By November 30, complete the design of our educational module that will be delivered to caregivers in workshops conducted through El Nido de Esperanza and Choosing Healthy and Active Lifestyles for Kids (CHALK) early childhood centers. Design of the module and workshop will be informed by our randomized baseline survey and in conjunction with 2-3 parent partners, who will be identified through the help of our community partners. Then, by January 1, 2023, conduct at least one educational workshop for caregivers, through El Nido de Esperanza or a Choosing Healthy and Active Lifestyles for Kids (CHALK) early childhood center with plans to complete more workshops in the subsequent months. Finally, by June 1, 2023, train 8 members of El Nido de Esperanza and/or Choosing Healthy and Active Lifestyles for Kids (CHALK) early childhood

centers (approximately 2 per site) to conduct our educational module as a part of their already established curriculum for parents and home day care centers.

AAP District

District II

Institutional Name

Morgan Stanley Children's Hospital of NewYork-Presbyterian Hospital and Columbia University

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